

10-19-01 A

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

<b>APPLICATION ELEMENTS</b>		<b>Attorney Docket No.</b>	TI-27874
		<b>First Inventor</b>	Chong Chin Hui
		<b>Title</b>	DIE PAD FOR INTEGRATED CIRCUITS
		<b>Express Mail Label No.</b>	EL645509130US

See MPEP chapter 600 concerning utility patent application contents

1. <input checked="" type="checkbox"/>	Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/>	Specification (preferred arrangement set forth below)	a. <input type="checkbox"/> Computer Readable Form (CRF)	
	- Descriptive title of the Invention	b. <input type="checkbox"/> Specification Sequence Listing on:	
	- Cross Reference to Related Applications	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or	
	- Statement Regarding Fed sponsored R & D	ii. <input type="checkbox"/> paper	
	- Reference to sequence listing, a table, or a computer program listing appendix	c. <input type="checkbox"/> Statements verifying identity of above copies	
	- Background of the Invention		
	- Brief Summary of the Invention		
	- Brief Description of the Drawings (if filed)		
	- Detailed Description		
	- Claim(s)		
	- Abstract of the Disclosure		
4. <input checked="" type="checkbox"/>	Drawing(s) (35 U.S.C. 113)	[ Total Pages 10 ]	9. <input type="checkbox"/> Assignment Papers (cover sheet & documents(s))
5. <input type="checkbox"/>	Oath or Declaration	[ Total Sheets 4 ]	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of Attorney
a. <input checked="" type="checkbox"/>	Newly Executed (original or copy)	[ Total Pages 2 ]	11. <input type="checkbox"/> English Translation Document (if applicable)
b. <input type="checkbox"/>	Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)	12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations	
i. <input type="checkbox"/>	<b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	13. <input checked="" type="checkbox"/> Preliminary Amendment	
6. <input type="checkbox"/>	Application Data Sheet. See 37 CFR 1.76	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
		15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
		16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
		17. <input type="checkbox"/> Other:	

JC997 U.S. PTO  
09/982595

10/18/01

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation     Divisional     Continuation-in-part (CIP)

of prior application No: \_\_\_\_\_ / \_\_\_\_\_

Group / Art Unit: \_\_\_\_\_

Prior application information.

Examiner \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

Customer Number or Bar Code Label

23494  
(Insert Customer No. or Attach bar code label here)

or  Correspondence address below

NAME	Texas Instruments Incorporated		
ADDRESS			
CITY	STATE	TX	ZIP CODE
COUNTRY	TELEPHONE	(972) 271-1176	FAX (972)917-4418

Name (Print/Type)	Jacqueline J. Garner	Registration No. (Attorney/Agent)	Reg. No. 36,144
Signature			Date 10/18/01

Burden Hour Statement. This form is estimated to take 0 2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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# FEE TRANSMITTAL for FY 2001

**TOTAL AMOUNT OF PAYMENT** (\$ 740.00)

Complete If Known	
Application Number	TBD
Filing Date	10/18/01
First Named Inventor	Chong Chin Hui
Examiner Name	TBD
Group Art Unit	TBD
Attorney Docket No.	TI-27874

## METHOD OF PAYMENT

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to

Deposit Account Number  
20-0668

Deposit Account Name  
Texas Instruments Incorporated

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status See 37 CFR 1.27

2.  Payment Enclosed:

Check  Credit card  Money Order  Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Entity Fee (\$)	Small Entity Fee Code (\$)	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	\$740
106	320	206	180	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	
<b>SUBTOTAL (1)</b>				<b>(\$740)</b>	

### 2. EXTRA CLAIM FEES

Extra Claims				Fee from below	Fee Paid
Total Claims	12	-20**=	0	X	18 = 0
Independent Claims	2	-3** =	0	X	64 = 0
Multiple Dependent			0	=	0
Large Entity Fee Code (\$)	18	203	9	Fee Description	
103	18	203	9	Claims in excess of 20	
102	80	202	40	Independent claims in excess of 3	
104	270	204	135	Multiple dependent claim, if not paid	
109	80	209	40	**Reissue independent claims over original patent	
110	18	210	9	**Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (2)</b>				<b>(\$ 0)</b>	

\*\*or number previously paid, if greater; For Reissue, see above

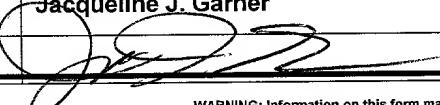
### 3. ADDITIONAL FEES

Large Entity Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee of oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
144	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	130	123	130	Petitions related to provisional applications	
126	180	126	180	Submission of information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify)					

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) (\$)**

## SUBMITTED BY

Name (Print/Type)	Jacqueline J. Garner	Registration No. (Attorney/Agent)	36,144	Telephone	(972) 271-1176
Signature				Date	10/18/01

Complete (if applicable)

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